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## BIB DATA SHEET

CONFIRMATION NO. 1633

<b>SERIAL NUMBER</b> 10/561,752	<b>FILING or 371(c) DATE</b> 01/26/2006 <b>RULE</b>	<b>CLASS</b> 005	<b>GROUP ART UNIT</b> 4153	<b>ATTORNEY DOCKET NO.</b> 16-978P/US	
<b>APPLICANTS</b> Anthony Bruce Pike, London, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB04/02740 06/24/2004 YES KJN 2008/01/15 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 03146594 06/24/2003 YES KJN 2008/01/15 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 02/17/2006					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /KERI JESSICA NICHOLSON/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> TAROLLI, SUNDHEIM, COVELL & TUMMINO L.L.P. 1300 EAST NINTH STREET, SUITE 1700 CLEVELAND, OH 44114 UNITED STATES					
<b>TITLE</b> Medical protection sheeting					
<b>FILING FEE RECEIVED</b> 540	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		